

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	PULMONARY VEIN ABLATION STENT AND METHOD
Attorney Docket Number::	022727-0092
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	5
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Ireland
Status::	Full Capacity
Given Name::	David
Family Name::	Keane
City of Residence::	Wellesley
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	51 Woodside Avenue
City of mailing address::	Wellesley
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	02482-2205

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/539,056	03/30/00

Assignee Information

Assignee name:: THE GENERAL HOSPITAL
CORPORATION d/b/a MASSACHUSETTS
GENERAL HOSPITAL

Street of mailing address:: 55 Fruit Street

City of mailing address:: Boston

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02114